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## \*BIBDATASHEET\*

CONFIRMATION NO. 1317

Bib Data Sheet

|                                    |   |                     |                               |  |
|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>10/826,616 | <b>FILING OR 371(c) DATE</b><br>04/16/2004<br><b>RULE</b> | <b>CLASS</b><br>156 | <b>GROUP ART UNIT</b><br>1734 | <b>ATTORNEY DOCKET NO.</b><br>8404.049 |
|------------------------------------|---|---------------------|-------------------------------|--|

**APPLICANTS**  
 Donald E. Weder, Highland, IL;  
 Joseph G. Straeter, Highland, IL;

**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a CON of 10/366,738 02/14/2003 ABN  
 which is a CON of 09/819,309 03/28/2001 PAT 6,533,886  
 which is a CON of 09/056,522 04/07/1998 ABN  
 which is a CON of 08/440,038 05/12/1995 PAT 5,820,712  
 which is a CON of 08/003,777 01/13/1993 PAT 5,459,976

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 06/26/2004**

|  |                               |                            |                           |                                |
|--|-------------------------------|----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | <b>STATE OR COUNTRY</b><br>IL | <b>SHEETS DRAWING</b><br>8 | <b>TOTAL CLAIMS</b><br>30 | <b>INDEPENDENT CLAIMS</b><br>2 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                               |                            |                           |                                |
| Verified and Acknowledged<br>Examiner's Signature: <i>[Signature]</i> Initials: <i>MCU</i>   |                               |                            |                           |                                |

**ADDRESS**  
30589

**TITLE**  
Method of covering a flower pot or floral grouping

|                                   |   |   |
|-----------------------------------|---|---|
| <b>FILING FEE RECEIVED</b><br>950 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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